

Book reviews

Healers and Alternative Medicine – a Sociological Examination

Gary Easthope, 209 pages, London, £8.50, Edward Arnold, 1978.

'I tried to patch this jumble into whole cloth. The problem was it kept falling apart at the seams'. In his honest introduction, the author acknowledges the major flaw in this book. As he goes on to admit, it would have required a team of physiologists, doctors, psychologists and sociologists to do the work properly. Such a team is currently being assembled at St Mary's Hospital Medical School – whether it does the work properly is as yet to be determined. It will, nevertheless, find Easthope's book a useful addition to this subject.

He explores five categories of healers including the spiritual healers, miraculous healing (Lourdes), radiesthesia, eastern healers and healers from the Philippines. The most useful addition to these descriptions is the verbatim accounts of a 'healing session' that enable the reader to make his own judgement as to the nature of what is actually occurring between the healer and the patient. It is clear that Easthope feels that some of what he saw would fall into the accepted definition of magic, charlatanism and pure quackery.

Nevertheless, the sociologist in him makes a very necessary and often neglected analysis of the meaning that these ritual acts carry. His comments on the nature of science, the importance of symbols and the move from the natural to the cultural are common debates in sociological disciplines but are not sufficiently engrained in medical education for doctors to grasp the complexity of their task. We are in part both scientists and Shamans, and need

to heal the split within us before the split in 'alternative' and 'orthodox' medicine will be healed.

Easthope's last two chapters on the nature of healing and the nature of man are however disappointing and poorly researched. He uses Maxwell Cades's model for an explanation of the 'energetic' base to the human condition but fails to mention much of the recent work undertaken both here and in the United States of America which puts forward a much better argument and incorporates evidence that even sceptics would find convincing. An expanded second edition would allow this book to compete with those already available on this subject. As it is, it is a useful and necessary read for the serious researcher.

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Ethical Issues in Family Medicine

Ronald J Christie, Barry C Hoffmaster, 194 pages, Oxford, £20.00, Oxford University Press, 1986.

This book is aimed at practising general practitioners and GP trainees. The authors are two Canadian professors, one a philosopher and the other a family practitioner. They based their work on seminars which they gave to a group of graduates drawn from their respective departments. Their starting point is that neither utilitarian nor deontological theory is of much use for the working general practitioner in helping with day-to-day ethical problems.

In the first few chapters they attempt to discredit the classical school of medical ethics, but unfortunately use a rather 'Aunt Sallyish' approach, setting

up the opposition in extreme positions before starting their arguments which are of course, easily won. The authors go on to suggest that a new 'middle way', which they describe as 'patient welfare' must be found. They argue that this can be done by a 'bottom-up' – ie rule-generating, method. Case studies are the basis of this approach.

In their discussion of the cases the authors adopt a rather paternalistic position, allowing patients to make their own decisions – but only as long as the doctor feels that the patient won't regret that decision at some time in the future. I think this is an approach that many general practitioners will feel comfortable with. In chapter six, entitled 'Toward an Ethic of Family Medicine' the authors write:

'In conclusion, this chapter suggests a way of developing an ethics of family medicine that transcends the prevailing obsession with autonomy understood as unconstrained freedom of decision-making. The rampant individualism of this approach to applied ethics is not compatible with the biopsychosocial systems orientation of family medicine.'

The book goes on to examine a much wider range of issues than are normally considered by medical ethicists. The topics range from difficult patients to conflict with hospital colleagues, from treating the family as the patient to non-payment of bills. Case studies again are the method of introduction to these subjects. The cases are discussed and rules-of-thumb generated, but no grand theory emerges. Perhaps this is an unrealistic expectation and the reader should be content with what is offered. I was, however, left with a faintly hollow feeling after finishing the book, as one whose pet theory has been unjustly criticised by someone with nothing substantive to offer in its place.

If, however, the book is taken as an excursion through the difficult ethical

dilemmas that general practitioners are frequently faced with, it admirably fulfils the task. The discussions of cases are enlightening, and will contribute to raising the quality of debate about ethical issues in general practice.

The book's introduction includes the sentence:

'Family physicians should become accustomed to considering the ethical aspects of their practice as routinely as they consider the biomedical, psychological and social dimensions'.

This book is a worthy contribution to that campaign and should help raise the ethical consciousness of general practitioners.

It deserves to be widely read.

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The Human/Animal Connection

Randall L Eaton, editor, 90 A4 pages, \$20, Sierra Nevada College Press and the journal *Carnivore: Interfacing Biology, Anthropology and Environmental Studies*, 1985.

This excellent collection of essays provides the reader with 'something new and something old' in the way we see the other animals that share this planet with us.

Randall Eaton, who edits the work, captures the essence of all the essays in his opening paragraph:

'The threat of global war and the equally dismal ecological problems have one origin: humanity . . .
. . . As the dominant species, every one of our global problems comes back to human greed or selfishness, soluble only by greater co-operation'.

In discussing how man came to be the most competitively successful species that ever lived, Dr Eaton discusses one or two novel hypotheses. For example, that virtually the whole of human culture owes its existence to 'man the hunter'. Thus early man's imitation of the animal to deceive it when being hunted provided us with the faculties by which we make and transmit culture. Weapons were among the first musical instruments and song originates, not only from imitating animal sounds, but from using voice to announce one's presence in advance. Dance, drama and

mime also have a common origin in the imitation of animals' movements.

Garth Snyder, in his essay, 'Poetry and the Magic of Animals', comments on the 'wildness' of animals:

'A relationship with an animal that has been domesticated is very different from meeting with a being that is a complete subject, fully free, self-managing, self-complete, self-aware'.

Charles Cameron, a poet rather than a scientist, takes us back in time to retell the stories of the North American Redman, that great family of many tribes who were at one with all living forces and who knew and accepted the oneness of all life.

Dr Michael Fox, a veterinarian and good friend, in his *Duty and the Beast*, also makes reference to the Redman in writing of the present plight of the animal kingdom, which is a symptom of what the Hopi Indians called 'Koyaanasqatsi', or 'life out of balance'. In discussing what we are doing to our environment and what we do to animals, he refers to the growing world-wide animal welfare and animal rights movement which, he says, is:

'A revolutionary force that uses reason and emotion – love (as respect for the sanctity and dignity of all life) – to bring about the peaceful transformation of society'.

Dr Fox also echoes the Indian view that all things on earth are related. The choice, he says, for man, between extinction and continuation, between suicide and adoration, rests and depends upon our acceptance of the fact that all life is one family.

Dr Paul Shepard takes the reader along a path of philosophical thought on the agony of our planet.

Dr Eaton, a scientist, as are most of the contributors, takes a view which perhaps sums up the ethos of this most interesting and worthwhile study by quoting Konrad Lorenz:

'To understand an animal, one must first love it. To a non-scientist such a declaration might not deserve more than casual notice, but for a scientist to tell other scientists that love is an essential ingredient for understanding an animal or anything else for that matter is to commit the sin of subjectivism'.

To which Dr Eaton adds:

'Certainly this great myth of Western

man we call science does not permit love, if for no other reason than the fact that it is immeasurable'.

My only criticisms of this book are that A4 size is not the most convenient and the style of presentation, with most pages being in two columns, was, I found, awkward. The inserted quotes from many sources through the ages add considerably to the interest of this fascinating book.

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Health, the Politician's Dilemma

George Teeling Smith, 22 pages, London, £1.00, Office of Health Economics, 1986.

This paperback outlines, in a few pages, the difficulties of meeting demands in the National Health Service in a climate of resource shortage but steady advance in medical care. The United Kingdom has tumbled down the world rankings for health expenditure per head of population and as a percentage of gross national product, hospital waiting lists have escalated and treatment rates fall short of those performed by our European neighbours.

Several of the contributors to today's widening discrepancy between health service demand and resource are inadequately discussed. The dilemma is self-perpetuating. As doctors become more successful at both preventing and treating disease, we live longer and our opportunities for expending health resources are extended. Improvements in education, together with changing attitudes have increased the expectations of the public, which further fuels demand.

Three approaches to improving the level of services which do not necessitate a corresponding increase in resource are proposed: improved efficiency by the creation of an 'internal market' within the National Health Service; the allocation of available resource to 'maximum utility' for the population; and the attraction of alternative funds, whether they be from private sources or medical charities. Teeling Smith heralds these solutions as 'new ideas', but they are, in fact very familiar. With regard to tightening-up efficiency, the author does not discuss